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| CERTIFICATE OF TRANSMISSION BY FACSIMILE (37 CFR 1.8) | | | Docket No. |
|--|--------------------------------|------------------------|---|
| Applicant(s): Davis et al. | | | 60LT1101-9 |
| Serial No. 09/644,012 | Filing Date August 22, 2000 | Examiner M. Jackson | Group Art Unit 1773 |
| Invention: POLYARYLENE ETHER ADHESIVE COMPOSITIONS | | | |
| | | | RECEIVED CENTRAL FAX CENTER JUL 13 2004 OFFICIAL |
| I hereby certify that this <u>Amendment Transmittal Letter (1 page); Amendment (21 pages)</u> (Identify type of correspondence) is being facsimile transmitted to the United States Patent and Trademark Office (Fax. No. <u>703-872-9306</u>) on <u>July 13, 2004</u> (Date) | | | |
| Rebecca L. Blake (Typed or Printed Name of Person Signing Certificate) <u>Rebecca L. Blake</u> (Signature) | | | |
| Note: Each paper must have its own certificate of mailing. | | | |

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|--|-------------------------------------|-----------------------------|--|---------|-------------------|
| AMENDMENT TRANSMITTAL LETTER (Large Entity) | | | Docket No. 601/T1101-9 | | |
| Applicant(s): Davis et al. | | | | | |
| Serial No. 09/644,012 | Filing Date August 22, 2000 | Examiner M. Jackson | Group Art Unit 1773 | | |
| Invention: POLYARYLENE ETHER ADHESIVE COMPOSITIONS | | | | | |
| <u>TO THE COMMISSIONER FOR PATENTS:</u> | | | | | |
| Transmitted herewith is an amendment in the above-identified application. The fee has been calculated and is transmitted as shown below. | | | | | |
| CLAIMS AS AMENDED | | | | | |
| | CLAIMS REMAINING AFTER AMENDMENT | HIGHEST # PREV. PAID FOR | NUMBER EXTRA CLAIMS PRESENT | RATE | ADDITIONAL FEE |
| TOTAL CLAIMS | 35 - | 35 = | 0 x | \$18.00 | \$0.00 |
| INDEP. CLAIMS | 6 - | 6 = | 0 x | \$84.00 | \$0.00 |
| Multiple Dependent Claims (check if applicable) <input type="checkbox"/> | | | | | \$0.00 |
| TOTAL ADDITIONAL FEE FOR THIS AMENDMENT | | | | | \$0.00 |
| <input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. 07-0862 <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. | | | | | |
|  J. Michael Buchanan Registration No. 44,571 Customer No. 23413 Telephone No. (860) 286-2929 | | | Dated: July 13, 2004 | | |
| cc: | | | I certify that this document and fee is being deposited on 7-13-04 with the U.S. Postal Service as first class mail under 37C.F.R. 1.8 and is addressed to the for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. | | |
| | | |  Signature of Person Mailing Correspondence | | |
| | | | VIA FACSIMILE by Rebecca L. Blake Typed or Printed Name of Person Mailing Correspondence | | |

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